PTOCBAT (0.8-0)
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"FEE ADDRESS" INDICATION FORM	
Address to: Mail Stop M Correspondence Commissioner for Patents P.O. Box 1450 - Alexandria, VA 22313-1450	Fax to: 571-273-6500 OR -
INSTRUCTIONS: The issue fee must have been paid for application(s) listed on this form. In addition, only an address represented by a Customer Number can be established as the fee address for maintenance fee purposes (hereafter, fee address). A fee address should be established when correspondence related to maintenance fees should be mailed to a different address than the correspondence address for the application. When to check the first box below: If you have a Customer Number presenting the desired fee address, When to check the second box below: If you have no Customer Number presenting the desired fee address, when to check the second box below: If you have no Customer Number (PTO/SB/125) must be attached to this form. For more information on Customer Numbers, see the Manual of Patient Examining Procedure (MPEP) § 400.	
1.363 the address associated with: X Customer Number: 30678 OR The attached Request for Customer Number (PTO/SB/125) form.	
PATENT NUMBER (ff known)	APPLICATION NUMBER
Completed by (check one):	
Applicant/Inventor	/Jeffrey W. Gluck/
X Attorney or Agent of record 44,457	Jeffrey W. Gluck
(Reg. No.) Assignee of record of the entire interest. See 37 CFR 3. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	71. (202) 331-7111 Requester's telephone number
Assignee recorded at Reel Frame	March 3, 2009
Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
'Total of forms are submitted.	